## PART B - FEE(S) TRANSMITTAL

omplete and and this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450

IE 22 IN			or <u>Fax</u>	Alexandria, Virg (703) 746-4000	ginia 22313-14	50		
ASTRUCTION his for a finite and the second t	orm should be used for trans orrespondence including the I below or directed otherwise	smitting the ISSUE F. Patent, advance orders in Block 1, by (a) spe	EE and PUE and notificat ecifying a ne	LICATION FEE (if requion of maintenance fees was correspondence address	ired). Blocks 1 to will be mailed to ; and/or (b) indicates	nrough 5 shoul the current con tring a separate	ld be completed respondence add : "FEE ADDRES	where ess as S" for
CURRENT CORRESPONDENCE	CE ADDRESS (Note: Use Block 1 for 7590 09/21/2004 DLD, P.L.L.C. R	any change of address)		I hereby certify that the States Postal Service addressed to the Mai transmitted to the USF	e of mailing of tra rtificate of Mailin his Fee(s) Transm with sufficient pos il Stop ISSUE FI TO (703) 746-400	g or Transmis ttal is being de tage for first cl EE address abo 00, on the date	esion.	United velope esimile
C:2501	700.00 OP		•	Michael	J. BUJOLI	Reall	1	gnature)
C:1504	300.00 OP			December	20, 2004	Justan		(Date)
APPLICATION NO.	FILING DATE	FIRS	T NAMED IN	VENTOR	ATTORNEY DO	CKET NO.	CONFIRMATION 1	10.
10/083,821	02/27/2002	· · · · · · · · · · · · · · · · · · ·	Gordon Lam	ont	THOLAM P	177US	6529	
APPLN. TYPE nonprovisional	SMALL ENTITY YES	ISSUE FEE	700	PUBLICATION FEE	TOTAL FEE(S	) DUE \$1000	DATE DUE 12/21/2004	
EXAMINER		ART UNIT		CLASS-SUBCLASS	1			
DONNELLY, JEROME W		3764		482-123000				
CFR 1.363).  Change of corresponded rest form PTO/SB/1  There Address indicates and the state of	Correspondence of (2)	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
Number is required.								
3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in  (A) NAME OF ASSIGN	D RESIDENCE DATA TO BE s an assignee is identified be in 37 CFR 3.11. Completion of	E PRINTED ON THE clow, no assignee data of this form is NOT a st	will appear of the state of the	on the patent. If an assign illing an assignment. CITY and STATE OR CO	UNTRY)			
3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth it  (A) NAME OF ASSIGN  Please check the appropriate  4a. The following fee(s) are	D RESIDENCE DATA TO B. s an assignee is identified be in 37 CFR 3.11. Completion of NEE	E PRINTED ON THE clow, no assignee data of this form is NOT a st  (B) RE ries (will not be printed	will appear of ubstitute for it is in the paten on the paten of Fee(	on the patent. If an assigning an assignment.  CITY and STATE OR CO  (a):	UNTRY) orporation or othe			
3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in  (A) NAME OF ASSIGN  Please check the appropriate 4a. The following fee(s) are	D RESIDENCE DATA TO Best an assignee is identified best in 37 CFR 3.11. Completion of the completion o	E PRINTED ON THE clow, no assignee data of this form is NOT a strength (B) RE ries (will not be printed 4b. Pay	will appear abstitute for from the paten rement of Fee(A check in the	on the patent. If an assigning an assignment.  CITY and STATE OR CO  a): Individual C  c):  a): a Individual C  c):  a amount of the fee(s) is er	UNTRY)  orporation or othe			
3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in (A) NAME OF ASSIGN  Please check the appropriate 4a. The following fee(s) are	D RESIDENCE DATA TO Best an assignee is identified been 37 CFR 3.11. Completion of the completion of t	E PRINTED ON THE clow, no assignee data of this form is NOT a strength (B) RE ries (will not be printed 4b. Pay 2d)	will appear of abstitute for it SIDENCE: ( on the paten rement of Fee(A check in the Payment by compared to the substitution of the substitution o	on the patent. If an assigning an assignment.  CITY and STATE OR CO  (a):	Orporation or othe nclosed.  8 is attached.	r private group	entity 🚨 Gover	nment
3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in  (A) NAME OF ASSIGN  Please check the appropriate 4a. The following fee(s) are Issue Fee Publication Fee (No solution Advance Order - # of the content of the cont	D RESIDENCE DATA TO Best an assignee is identified been 37 CFR 3.11. Completion of NEE  The assignee category or category enclosed:	E PRINTED ON THE clow, no assignee data of this form is NOT a state of this form is NOT as the cries (will not be printed 4b. Pay 4d) 2d	will appear of ubstitute for it SIDENCE: (  on the patent of Fee( A check in the Payment by country of the Director of the Country of the Director of the Country of the Director of the Direc	on the patent. If an assigning an assignment.  CITY and STATE OR CO  Dipolar individual Co  City in C  City in Co  City in Co	orporation or othen closed.  8 is attached. charge the required (enclosed).	r private group  I fee(s), or cree e an extra copy  s. See 37 CFR	entity Government Gove	ent, to
3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in  (A) NAME OF ASSIGN  Please check the appropriate 4a. The following fee(s) are Issue Fee Publication Fee (No solution) Advance Order - # o  5. Change in Entity Status a. Applicant claims S	D RESIDENCE DATA TO Best an assignee is identified best in 37 CFR 3.11. Completion of the second sec	E PRINTED ON THE clow, no assignee data of this form is NOT a state of this form is NOT as the cries (will not be printed 4b. Pay 4d) 2d	will appear of ubstitute for it SIDENCE: (  on the patent of Fee( A check in the Payment by country of the Director of the Country of the Director of the Country of the Director of the Direc	on the patent. If an assigning an assignment.  CITY and STATE OR CO  Dipolar individual Co  City in C  City in Co  City in Co	orporation or othen closed.  8 is attached. charge the required (enclosed).	r private group  I fee(s), or cree e an extra copy  s. See 37 CFR	entity Government Gove	ent, to
3. ASSIGNEE NAME AND PLEASE NOTE: Unless recordation as set forth in  (A) NAME OF ASSIGN  Please check the appropriate 4a. The following fee(s) are Issue Fee Publication Fee (No solution Advance Order - # of the content of the cont	D RESIDENCE DATA TO Best an assignee is identified been 37 CFR 3.11. Completion of NEE  The assignee category or category enclosed:	E PRINTED ON THE clow, no assignee data of this form is NOT a state of this form is NOT as the cries (will not be printed 4b. Pay 4d) 2d	will appear of ubstitute for it SIDENCE: (  on the patent of Fee( A check in the Payment by country of the Director of the Country of the Director of the Country of the Director of the Direc	on the patent. If an assigning an assignment.  CITY and STATE OR CO  Dipolar individual Co  City in C  City in Co  City in Co	orporation or other aclosed.  8 is attached.  charge the required (enclosed).  LL ENTITY statutly paid issue fee to istered attorney or	r private group  I fee(s), or cree e an extra copy  s. See 37 CFR	entity Government Gove	ent, to

Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.